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ULVERSTON RURAL DISTRICT COUNCIL



ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1947

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1948

FLETCHER AND ROBINSON
QUEEN STREET, ULVERSTON

MATERNAL MORTALITY.—Nil.

CAUSES OF DEATH.

The table below shows the causes of death of Rural District residents in 1947 :—

CAUSES OF DEATH.	MALE.	FEMALE.	TOTAL.
1. Typhoid and Para-typhoid....	—	—	—
2. Measles	—	—	—
3. Scarlet Fever.....	—	—	—
4. Whooping Cough.....	—	—	—
5. Diphtheria	—	—	—
6. Influenza	3	3	6
7. Encephalitis lethargica.....	—	—	—
8. Cerebro-spinal Fever	—	—	—
9. Tuberculosis of Respiratory System.....	1	2	3
10. Other Tuberculosis Diseases	—	—	—
11. Syphilis	—	—	—
12. General Paralysis of the Insane.....	—	—	—
13. Cancer, malignant disease	21	17	38
14. Diabetes.....	—	—	—
15. Cerebral Haemorrhage.....	12	19	31
16. Heart Disease	34	48	82
17. Aneurysm	—	—	—
18. Other Circulatory Diseases.....	—	—	—
19. Bronchitis	2	5	7
20. Pneumonia (all forms).....	3	3	6
21. Other Respiratory Diseases.....	—	—	—
22. Peptic Ulcer	3	1	4
23. Diarrhoea (under two years of age)	1	—	1
Diarrhoea (over two years of age)	—	—	—
24. Appendicitis	—	—	—
25. Cirrhosis of Liver.....	—	—	—
26. Other Diseases of Liver	—	—	—
27. Other Digestive Diseases	—	2	2
28. Acute and Chronic Nephritis	2	3	5
29. Puerperal Sepsis	—	—	—
30. Other Puerperal Causes	—	—	—
31. Congenital debility, premature birth, mal- formation, etc.	7	1	8
32. Senility	10	10	20
33. Suicide	—	1	1
34. Other violence	2	3	5
35. Other defined diseases.....	11	7	18
36. Causes ill-defined or unknown.....	—	—	—
	<hr/> 112	<hr/> 125	<hr/> 237

The principle causes of death in the Rural District in 1947 as shown by the above table were :—Heart Disease (82), Cancer (38), Cerebral arterial diseases (31), one death occurred from Poliomyelitis.

CANCER.—Brief particulars of the 38 deaths from this disease are shown below :—

SITE.	MALE.	FEMALE.	TOTAL.
Stomach	5	5	10
Colon	5	1	6
Lung	2	—	2
Oesophagus	2	—	2
Breast ...	—	3	3
All other sites....	7	8	15
	—	—	—
	21	17	38
	—	—	—

The table below shows comparisons between birth and death rates in England and Wales, 148 smaller towns and this district.

Year.	England and Wales.		148 Smaller Towns. 25-50,000 population.		Ulverston Rural District.	
	Births.	Deaths.	Births.	Deaths.	Births.	Deaths.
1944	17.6	11.6	20.9	12.4	17.8	13.9
1945	16.1	11.4	19.2	12.3	16.1	11.3
1946	19.1	11.5	21.3	11.7	16.6	13.6
1947	20.5	12.0	22.2	11.9	16.9	14.3

The birth rate remained lower and the death rate higher than in the country generally.

The age distribution of deaths in 1947 is shown below :—

-1	1-	5-	10-	15-	20-	30-	40-	50-	60-	65-	70-	75-	80-	85-	90-	Total.
11	1	0	2	0	2	2	11	12	18	30	38	32	41	29	8	237

75.1 per cent. of the deaths were in persons of 65 and over.

GENERAL PROVISION OF HEALTH SERVICES.

PERSONNEL.

Medical Officer of Health :— A. Dodd, M.D., Ch.B., M.R.C.S.,
L.R.C.P., D.P.H.

Other Appointments held :— Assistant County Medical Officer—
Lancashire County Council.
Medical Officer of Health—Ulverston
Combined Sanitary District.
Medical Officer—Ulverston Joint
Hospital Board.

Senior Sanitary Inspector :— H. C. Claydon, Certificate—Royal
Sanitary Institute.
Certificate Royal Sanitary Insti-
tute—Meat and Other Foods.

Sanitary Inspector (from 1st May, 1947).

A. J. Birkett, Certificate—Royal Sanitary Institute.

HOSPITAL SERVICES.

No major change occurred during the year in the hospital services of the district.

AMBULANCE FACILITIES.

Two motor ambulances for accidents and non-infectious illnesses are provided by the Ulverston Joint Ambulance Committee. In addition to these, an ambulance is maintained by the Ulverston Joint Hospital Board for conveying patients suffering from Infectious Disease to High Carley Isolation Hospital. There are reciprocal arrangements for help in case of need with the Dalton-in-Furness and Grange-over-Sands Urban District Councils in each of which a motor ambulance is maintained.

LABORATORY FACILITIES.

Bacteriological examinations are carried out at the Ministry of Health Emergency Medical Service Laboratory at High Carley. Chemical analyses, as required, are sent to the City Laboratories, Liverpool.

MATERNITY AND CHILD WELFARE, SCHOOL MEDICAL, DENTAL AND HEALTH VISITING SERVICES, ULVERSTON COMBINED SANITARY DISTRICT.

These services are provided by the Lancashire County Council. Routine child welfare clinics, minor ailment clinics, dental clinics and school medical and dental inspections are undertaken by Assistant County Medical and Dental Officers with health visitors and school nurses. The ophthalmic surgeon, obstetrician and orthopaedic specialist attend the appropriate eye, ante-natal and post-natal, and orthopaedic clinics at Ulverston and Dalton-in-Furness. In addition, the obstetrician visits the Grange clinic fortnightly.

The times and places where County Council Clinics are held are shown below. County District Immunisation Clinics are also given.

CONISTON, Church Rooms, Yewdale Road.

1st Friday each month, 2 p.m., Child Welfare Centre.

GRANGE, Congregational Sunday School, Kents Bank Road.

2nd and 4th Friday each month, a.m., Ante-natal Clinic.

Tuesday, fortnightly, p.m., Child Welfare Centre.

COUNCIL OFFICES.

1st Tuesday, each month, 2 p.m., Immunisation Clinic.

ULVERSTON, Brogden Street.

Monday a.m. Minor Ailments Re-dressing Clinic.

Dental Clinic.

p.m. Ante-Natal Clinic.

Dental Clinic.

Tuesday	a.m.	Dental Clinic.
	p.m.	Dental Clinic.
		Orthopaedic Clinic every two months.
Wednesday	a.m.	Minor Ailments and Inspection Clinic.
	p.m.	Child Welfare Centre.
Thursday	a.m.	Ophthalmic Clinic.
		Dental Clinic.
	p.m.	Dental Clinic.
Friday	a.m.	Nil.
	p.m.	Immunisation, 1st Friday, every month, 2 p.m.

DALTON, The Clinic, Dowdales Grounds.

Monday	a.m.	Nil..
	p.m.	Immunisation, 1st Monday, every month, 2 p.m.
Tuesday	a.m.	Minor Ailments Re-dressing Clinic.
	p.m.	Nil.
Wednesday	a.m.	Ophthalmic Clinic.
	p.m.	Ante-natal Clinic.
Thursday	a.m.	Minor Ailments and Inspection Clinic
	p.m.	Child Welfare Centre.
Friday	a.m.	Dental Clinic.
	p.m.	Dental Clinic.

SANITARY CIRCUMSTANCES OF THE DISTRICT.

WATER SUPPLIES.

Details of the water supplies in the Rural District are to be found in the reports of the Medical Officers of Health for the years 1943, 1944 and 1946. Much information is also to be found in the report of the Comprehensive Scheme of Water Supply for the Furness Area of Messrs. Edward Sandeman, Kennard and Partners, dated the 19th September, 1946.

The following are the main developments which took place during 1947 along with some figures regarding the position at the end of the year.

LAKE-SIDE WATER SUPPLY SCHEME.

Following an interview of representatives of the Council with representatives of the Ministry of Health, in London, in September, the Ministry requested further information from the Council regarding the corrosive quality of Bortree Tarn water and the result of a practical test as to the damage caused by the water to galvanised piping. The Engineer forwarded to the Ministry a copy of a report of the City Analyst of Liverpool upon a length of piping which had been conveying water from Bortree Tarn it is said for 25 years. The City Analyst reported as follows :—" Regarding the effect of Bortree Tarn water on galvanised iron piping, I have examined the short length of pipe which you forwarded to me on the 8th October, which you informed me had been in service with this water for at least 25 years.

" The pipe was in excellent condition and under the deposit on the inner surface there appeared to be very little corrosion of the iron. The deposit on the inner surface was greyish brown in colour and consisted of iron oxide and carbonate with zinc and calcium carbonates.

“ The presence of zinc in this deposit after such a period of use indicates that a protective layer has been formed which has prevented attack of the iron—otherwise zinc would have disappeared completely and considerable erosion would have occurred.

“ It appears to me that if galvanised iron piping were used with Bortree Tarn water there might at first be an appreciable solution of zinc from the galvanising which would diminish as the protective coating was built up. When this layer has formed, there will be very little further action and the pipe should be good for many years' service.

“ It thus appears that galvanised iron piping will be satisfactory in service, but during the period following the installation of new piping the water passing through such piping may contain appreciable amounts of zinc.”

The position at the end of the year was that the Council had agreed to the terms upon which the Owner of the Tarn would allow the abstraction of water from the tarn and the construction of the works and the laying of the necessary pipe line on and through his land.

OUTGATE WATER SUPPLY SCHEME.

An Inquiry into the Outgate Water Supply Scheme was held on the 18th November, 1947, at the Town Hall, Hawkshead, by an Inspector of the Ministry of Health. At the end of the year no communication had been received from the Ministry regarding the result of the Inquiry.

SKELWITH WATER SUPPLY SCHEME.

During the year progress was made with the scheme to supply water to Skelwith. The approval of the County Council to this scheme under the Rural Water Supplies and Sewerage Act, 1944, was obtained in November. The Water Supplies and Sewerage Committee decided in December to seek the approval of the Ministry of Health to borrow the sum of £6,000 for the purposes of the scheme.

FOXFIELD WATER SUPPLY SCHEME.

Approval of the County Council to this scheme under the Rural Water Supplies and Sewerage Act, 1944, was obtained in November, 1947.

COAST ROAD WATER SUPPLY SCHEME.

At the end of the year, it was reported by the Engineer that delivery of the necessary pipes in connection with this Scheme had commenced and that the Contractors hoped to begin laying the pipes at an early date.

LOW FURNESS WATER SUPPLY SCHEME.

The work of renewing the water main from Skeldon Moor to Scales started in October, 1947. At the end of the year approximately 500 yards of piping had been laid.

HIGH CARK AND SEATTLE WATER SUPPLY.

The work of laying the new main was completed satisfactorily in November and most of the farms and cottages *en route* had been connected to the main by the end of the year.

GAWTHWAITE WATER SUPPLY SCHEME.

The Gawthwaite Water Supply Scheme was completed in November when all farms and houses were connected to the new supply.

HAWKSHEAD WATER SUPPLY SCHEME.

During 1947, the Ministry of Health gave approval to the obtaining of a loan of £900 for the purpose of replacing the main from Hawkshead Water Works at Roger Ground to a point near St. Michael's Church, Hawkshead.

The following table shows the number of dwelling-houses and numbers of the population supplied with water from public mains and from private sources in the parishes of the Rural District at the end of 1947 :—

TOWNSHIPS.	From Public Mains.				From Private Wells and Springs, etc.	
	Direct to houses.		By means of stand pipes.			
	No. of dwelling-houses.	No. of population.	No. of dwelling-houses.	No. of population.	No. of dwelling-houses.	No. of population.
Aldingham	255	870	—	—	5	18
Allithwaite Lower	417	1113	—	—	2	5
Allithwaite Upper	208	709	—	—	10	36
Angerton	—	—	—	—	5	23
Blawith	—	—	—	—	37	117
Broughton East	26	100	—	—	25	109
Broughton West	262	820	—	—	39	137
Cartmel Fell	18	58	—	—	95	256
Claife.....	139	371	—	—	33	125
Colton	13	62	—	—	303	1059
Coniston	233	674	32	88	43	165
Dunnerdale, etc.	—	—	—	—	57	175
Egton-with-Newland .	110	324	—	—	161	552
Haverthwaite	187	537	—	—	56	271
Hawkshead	172	446	—	—	20	84
Holker Lower	396	1305	—	—	46	183
Holker Upper	8	38	—	—	40	179
Kirkby Ireleth	364	1154	—	—	43	204
Lowick	29	100	—	—	46	177
Mansriggs.....	1	5	—	—	9	46
Osmotherley	39	66	—	—	46	246
Pennington	331	1391	—	—	6	26
					(Private main).	
Satterthwaite	—	—	—	—	94	316
Skelwith	—	—	—	—	91	254
Staveley	117	310	—	—	5	18
Subberthwaite	9	30	—	—	15	47
Torver	—	—	—	—	60	196
Urswick	351	1055	—	—	5	19

DRAINAGE AND SEWERAGE.

Particulars of existing methods of disposal of sewage in the various townships of the Rural District are given below :—

TOWNSHIP.	VILLAGE.	METHOD OF DISPOSAL.
Aldingham	Leece	Sewage tank and land irrigation.
	Gleaston	Sewage tank.
	Scales	Two Sewage tanks with overflows to land.
Allithwaite Lower	Baycliffe	Sewage tank with outfall to sea.
	Allithwaite	Sewage disposal works with tanks and filters—outfall to sea.
	Cartmel	Sewage disposal works with tanks and filters—outfall to River Eea.
Allithwaite Upper	Lindale	Sewage disposal works with tanks and filters—outfall to River Winster.
	Newton	Sewage disposal works with tanks and filters—outfall to stream.
Broughton West	Broughton-in-Furness	Sewage tank with overflow to the tidal waters of the River Duddon.
	Foxfield	Tidal waters of the River Duddon.
Broughton East Claife	Field Brought'n	Sewage tank.
	Near Sawrey	Sewage tanks.
	Far Sawrey	Two sewage tanks with overflow to stream.
Colton	Colthouse	Sewage tank with overflow to stream.
	Bouth	Sewage tank with overflow to stream.
	Oxenpark	Sewage tank with overflow to land.
Coniston	Coniston	Five large sewage tanks with overflow to stream.
Egton	Greenodd	Tidal waters of Morecambe Bay.
	Pennybridge	Sewage tank.
Haverthwaite	Haverthwaite	Sewage tank with overflow to river.
	Backbarrow	Sewage tank with overflow to River Leven.
Hawkshead	Hawkshead	Sewage tank with outfall to stream.
	Outgate	Two sewage tanks with outfall to land and stream.
Holker Lower	Cark	Sewage tank with outfall to sea.
	Ravenstown	Sewage tank with filters.
	Flookburgh	Pumping Plant discharging sewage to enlarged works at Ravenstown with outfall to stream.
Kirkby Ireleth	Sandside	Tidal waters of River Duddon.
	Beckside	Sewage tank with outfall to stream.
	Chapples	Sewage tank with outfall to stream.
	Soutergate	Sewage tank with outfall to sea.
Lowick	Lowick Green	Sewage tank with outfall to River Crake.

Osmotherley	Beehive	Tank with outfall to stream.
	Tarn Close	Sewage tank with outfall to land.
	Three Bridges...	Sewage tank with outfall to stream.
Pennington	Swarthmoor ...	Outfall works of Ulverston U.D.C.
	Trinkeld	Outfall works of Ulverston U.D.C.
	Loppergarth ...	Sewage tank with outfall to land.
Satterthwaite	Satterthwaite ...	Private sewer to tank with outfall to stream.
Staveley	Staveley	Sewage tank with outfall to stream.
Torver	Torver	Sewage tank with outfall to stream.
Urswick	Great Urswick..	Sewage tanks with outfalls to Tarn.
	Little Urswick...	Sewage tanks with outfall to land.
	Stainton	Sewage tanks with outfalls to land.
	Bardsea	Sewage tanks with outfalls to sea.

PARTICULARS OF AREAS WHERE SEWERAGE HAS NOT BEEN PROVIDED.

TOWNSHIP.	VILLAGE.
Claife	Wray
Egton-with-Newland	Sparkbridge
Kirkby Ireleth	Grizebeck
Osmotherley	Broughton Beck
Haverthwaite	Backbarrow (part)
Aldingham	Newbiggin
Staveley	Ayside
	Barber Green
Subberthwaite	Gawthwaite

PARTICULARS OF AREAS WHERE SEWERAGE IS NOW UNDER CONSIDERATION.

TOWNSHIP.	VILLAGE.
Egton-with-Newland	Sparkbridge
Kirkby Ireleth	Grizebeck
Haverthwaite	Backbarrow (part)
Aldingham	Newbiggin
Staveley	Ayside

HOUSING.

STATISTICS.

1.	Number of new houses erected during the year :—	
	By the local authority	10
	By other local authorities.....	0
	By other bodies or persons	14
2a.	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts).....	141
b.	Number of inspections made for the purpose	169
3a.	Number of dwelling-houses which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	0

4. Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation (Rural Housing Survey) 49
5. Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation (Rural Housing Survey).... 510
6. Remedy of defects during the year without service of formal notices. Number of defective dwelling-houses rendered fit in consequence of informal action by the local authority or their officers 83
- 7a. Number of dwelling-houses in respect of which notices were served requiring defects to be remedied 74
- b. Number of dwelling-houses in which defects were remedied after service of formal notices by owners.... 9

The Local Authorities Housing Scheme in progress at the end of 1947 was the construction of 10 traditional type houses at Swarthmoor.

Projected schemes for 1948 include the building of 12 traditional type houses at Coniston and six at Pennybridge, and twenty permanent aluminium bungalows at Marshside, Kirkby-in-Furness, and 34 Airey Rural Type Houses at Coniston.

Shortage of satisfactory housing accommodation remained acute at the end of the year.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASE.

The following table shows the numbers of cases of the notifiable infectious diseases which occurred in the Rural District during the five years 1942 to 1946 compared with the numbers in 1947.

Disease.	1942	1943	1944	1945	1946	1947.		
						No. of Cases	Removed to Hospital	Deaths in Hospital
Scarlet Fever	22	15	31	13	10	10	8	—
Measles	89	98	102	166	2	84	2	—
Whooping Cough	24	37	17	16	44	18	—	—
Pneumonia	23	15	14	14	16	17	3	—
Puerperal Pyrexia	1	2	5	1	1	—	—	—
Cerebro-spinal Fever	4	1	2	—	2	1	1	—
Acute Encephalitis Lethargica	—	—	—	—	1	—	—	—
Erysipelas	4	2	1	—	1	5	—	—
Diphtheria	8	3	1	1	—	—	—	—
Dysentery	1	—	2	2	—	—	—	—
Enteric	—	—	—	1	—	2	2	—
Malaria	—	—	—	2	—	—	—	—
Poliomyelitis	—	—	—	—	—	8	8	1
TOTALS	176	173	175	216	77	145	24	1

The general incidence of infectious disease was low in 1947. The number of cases of measles increased, compared with 1946, conforming with the customary cyclic incidence of the disease.

A short report on the incidence of poliomyelitis in 1947 in the Ulverston Combined Sanitary District follows :—

POLIOMYELITIS/POLIOENCEPHALITIS IN THE ULVERSTON COMBINED SANITARY DISTRICT.

In 1947, 17 cases of Poliomyelitis or Polioencephalitis were notified in the Ulverston Combined Sanitary District. Eight of the patients lived in the Ulverston Rural District, seven in the Ulverston Urban District, one in the Dalton-in-Furness Urban District and one in the Grange-over-Sands Urban District. The fact that only one case occurred in Dalton is notable in view of the incidence during the year in the Ulverston Urban and Rural Districts as well as in the County Borough of Barrow-in-Furness. This single case occurred at a Farm in a Rural part of Dalton-in-Furness.

More detailed enquiry into these cases from an epidemiological aspect was made than has been customary in ordinary infectious diseases. Information was given and the respective forms completed in connection with the Poliomyelitis/Polioencephalitis Surveys of the Medical Research Council, The Lancashire County Council and the Hospital Survey of the Ministry of Health.

The table below shows the age, sex, date of onset, results of infection and the district in which the patient resided :—

Case No.	Age.	Sex.	Date of Onset.			Result.	District.
1	29	M.	3	4	1947	Died	Ulverston
2	33	F.	25	3	1947	Recovered	Bardsea
3	11	M.	2	5	1947	Died	Lowick Green
4	3	F.	7	5	1947	Recovered	Ulverston
5	1	M.	31	5	1947	Recovered	High Newton
6	29	F.	18	5	1947	Recovered	Sparkbridge
7	34	M.	17	6	1947	Recovered	Ulverston
8	49	F.	18	6	1947	Recovered	Finsthwaite
9	33	M.	27	6	1947	Recovered	Ulverston
10	34	F.	2	7	1947	Recovered	Ulverston
11	33	F.	1	7	1947	Recovered	Ulverston
12	12	M.	1	7	1947	Recovered	Backbarrow
13	3	M.	27	7	1947	Recovered	Askam
14	13	M.	?	7	1947	Recovered	Grange
15	29	M.	17	9	1947	Recovered	Bardsea
16	2	F.	19	10	1947	Died	Ulverston
17	6	M.	26	11	1947	Recovered	Swarthmoor

It will be observed from the above table that three deaths occurred, giving a case mortality of 17.6 per cent. Two of these three deaths were of children. Fourteen cases recovered although some had residual paralysis

or weakness. Only 8 cases occurred in children, representing 47 per cent. of the total. Six of these were male and 2 female. Nine cases occurred in adults, representing 53 per cent. of the total. Four of these were male and 5 female. The youngest adults affected were 29 years of age. A woman aged 29 was pregnant. She recovered and subsequently had a normal confinement.

The cases in the Rural District of Ulverston were scattered, no two cases occurring near to one another with the exception of two at Bardsea, but the dates of onset of these cases were respectively the 25th March and the 17th September, 1947. Of the cases in the Urban District of Ulverston, no two cases occurred in the same street, although cases occurred in streets which were near to one another. In the district as a whole, no two cases occurred in any one family, and no two cases occurred in any school. There was no recent history of tonsillectomy in any of these cases. No connection was traced between any two cases or contacts and despite enquiry no evidence was obtained suggesting spread by milk or foodstuffs or by faecal contamination.

There is some evidence that abortive cases occurred in one part of the Rural District. I was told by a General Practitioner some time after the occurrence that the people in the district had had peculiar cold catarrh symptoms with eye signs such as diplopia. So far as I am aware, all these cases recovered.

All known cases of Poliomyelitis/Polioencephalitis were removed to High Carley Isolation Hospital, excepting a boy from a private school in Grange who had returned home out of the district where the diagnosis was made.

The cases were classified for the survey of the Medical Research Council as follows :—

Non paralytic—mainly spinal.....	1
Paralytic	12
Non-paralytic—mainly cerebral	1
Presumptive—mainly cerebral.....	1
Not Polio (diagnosis indefinite)	2

The Ulverston Joint Hospital Board was not happy about the availability of a mechanical respirator at the time when cases were prevalent in the County Borough of Barrow-in-Furness and in the Ulverston Combined Sanitary District and considered purchasing a respirator. In view, however, of information received suggesting that it would probably be contrary to future policy to encourage the admission of Poliomyelitis cases to a small hospital such as the High Carley Isolation Hospital, the Joint Board did not proceed to the ordering or purchasing of a respirator.

DIPHTHERIA IMMUNISATION.

During 1947, a total of 274 children completed the full course of immunisation, namely, 196 under 5 years of age, and 78 between the ages of

5 and 15. In addition, 261 children had booster doses to maintain resistance to the disease.

TUBERCULOSIS.

The tuberculosis service in the Ulverston Combined Sanitary District is administered by the Lancashire County Council. The Dispensary at Ulverston is attended by the Consultant Tuberculosis Officer for the district and a Tuberculosis Health Visitor. Extensive facilities for the investigation and treatment of tuberculosis are available at High Carley Sanatorium, near Ulverston.

NEW CASES AND MORTALITY DURING 1947.

The following table shows the number of new cases of tuberculosis notified in the Ulverston Rural District in 1947.

AGE PERIODS.	NEW CASES.				DEATHS.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
Years.	M.	F.	M.	F.	M.	F.	M.	F.
0—	—	—	—	—	—	—	—	—
1—	—	—	—	—	—	—	—	—
5—	—	—	—	1	—	—	—	—
10—	—	—	1	1	—	—	—	—
15—	—	—	3	2	—	1	—	—
20—	1	—	1	1	—	—	—	—
25—	2	4	1	—	—	—	—	—
35—	—	1	—	—	—	—	—	—
45—	1	—	—	1	—	—	—	—
55—	—	1	—	—	1	—	—	—
65 and upwards	2	2	—	1	—	1	—	—
	6	8	6	7	1	2	—	—
TOTALS	14		13		3		0	

The table below shows the numbers of new cases and deaths from tuberculosis in Rural District residents during the past eleven years.

YEAR.	NEW CASES.				DEATHS.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
1937	8	8	4	3	3	3	0	0
1938	8	6	3	6	2	0	0	0
1939	6	6	3	8	4	3	0	1
1940	12	3	5	2	3	3	2	0
1941	11	11	3	4	2	5	0	0
1942	14	4	2	0	2	0	0	1
1943	11	14	3	5	3	3	1	0
1944	12	13	5	4	4	6	1	0
1945	5	5	5	7	1	3	0	0
1946	9	3	2	2	2	1	1	1
1947	6	8	6	7	1	2	0	0

It will be noted that there was a rise in the number of new cases of respiratory and non-respiratory tuberculosis in 1947 compared with the previous two years but there was no corresponding rise in the number of deaths.

In conclusion I thank the members of the Health Committee and the Officers of the Ulverston Rural District Council for courtesy and help.

I have the honour to be,

Your obedient servant,

A. DODD

MEDICAL OFFICER OF HEALTH.

ANNUAL REPORT OF THE SANITARY INSPECTORS FOR THE YEAR 1947.

The year (compared with 1946) revealed little change throughout the district in respect of the repair of dwellings. The general shortage of building labour and materials in most part accounted for this, and as soon as this is rectified much improvement can be looked for.

The progress of the Rural Housing Surevy authorised by the Ministry of Health revealed that a large proportion of the dwelling-houses were considerably below standard, and when conditions permit, the legislation of the Housing Act, 1936, will no doubt be put into use.

Much progress is anticipated in the near future in the provision of new main water supplies in various parts of the district, but it should be borne in

mind that a sewage disposal scheme is always a necessary complement to a main water supply, and equal importance should be attached to the problem of disposal if a nuisance is to be avoided.

Towards the end of the year, systematic sampling of the milk supplied to consumers throughout the district was commenced, both for bacteriological examination and the detection of B. Tuberculosis. It was too early to estimate either the proportion of cows yielding tuberculous milk or the present standard of cleanliness in the supplies.

The number of farms producing designated milk showed an increase of 12 during the year, and there are signs that more farmers will take advantage of the attractive bonuses paid during the ensuing year. Much of the available labour (apart from that engaged on the building of new houses) was concentrated on farm building improvements and some headway in this direction was made.

The systematic collection of refuse continued satisfactorily throughout the year, considering the nature of the area to be dealt with. All ashbins were emptied fortnightly and privy cleansing was carried out at approximately three monthly intervals. The conversion of privies to water-closets continued steadily, the number converted totalling 42. Most "dry" ashpits have now been abolished and portable bins substituted.

INSPECTION STATISTICS.

SANITARY INSPECTIONS, INCLUDING HOUSING.

Number of Premises, etc., visited	1269
Number of nuisances discovered	104
Number of nuisances abated	92

RURAL HOUSING SURVEY.

Total number of houses surveyed at the 31st December, 1947.....	2605
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DAIRIES AND COWSHEDS.

Number of farms inspected	522
New cowsheds provided	10
Cowsheds reconditioned	6
Dairies provided	14
Sterilising rooms provided	8
Water supplies provided	4
Drainage provided or improved	7
Number of milk samples taken for bacteriological examination	36
Number found unsatisfactory.....	3
Number found satisfactory	33
Number of milk samples taken for B. Tuberculosis examination	76
Number found positive	2

INFECTIOUS DISEASES.

Inquiries into cases of infectious diseases	....	....	39
Visits <i>re</i> disinfections	....	....	32
Miscellaneous infectious disease visits	....	....	13

VERMINOUS PREMISES.

Number of houses inspected	....	....	3
Number of houses treated for vermin	....	....	3
Number of visits made	....	....	7

FACTORIES ACT, 1937.

Number of inspections made	....	....	51
Inspection of Bakehouses	14

SHELLFISH REGULATIONS, 1934.

Visits to cockle layings	3
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MISCELLANEOUS INSPECTIONS AND VISITS.

Visits to Ice Cream premises (1 manufacturer, 4 re-tailers)	12
Visits to Butchers' Shops	....	....	7
Visits to Schools	....	....	7
Visits to Camping Sites	....	....	4
Visits <i>re</i> Smoke Nuisance (factory)	....	....	2

H. C. CLAYDON

A. J. BIRKETT

SANITARY INSPECTORS.

